PTO/SB/01 (08-03)
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information unless it contains a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to respon Attorney Docket Number 354 **DECLARATION FOR UTILITY OR** First Named Inventor HILL, LEANN **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date Declaration Declaration Submitted after Initial Submitted Art Unit With Initial Filing (surcharge (37 CFR 1.16 (e)) Filina **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: STATIONARY PEDIATRIC EXERCISE TRICYCLE (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International and was amended on (MM/DD/YYYY) (if applicable). Application Number I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date **Priority** Certified Copy Attached? Country (MM/DD/YYYY) Number(s) Not Claimed Yes Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## **DECLARATION** — Utility or Design Patent Application

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NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor										
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Application Number	
Filing Date	
First Named Inventor	HILL, Leann
Title	Passive Child Therapy Tricycle
Art Unit	1, 3
Examiner Name	
Attorney Docket Number	301

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t am the:  Applicant/Inventor.  Assignee of record of the entire in	iterest. See 37 CFR 3.71.							
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
	SIGNATURE of Applican	it or Assignee o	of Record					
Name Leann HILL /								
Signature & Alam Zhill								
Date # 9-17-03			Telephone	}				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
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